



Department of Environment and Conservation - Division of Water Pollution Control

NOTICE OF INTENT (NOI)

for Storm Water Discharges Associated with Industrial Activity under the

TENNESSEE MULTI-SECTOR GENERAL PERMIT (TMSP)

This application is for: ☐ New Permit ☐ Permit Reissuance ☒ Permit Modification

(If this NOI is submitted for Permit Modification provide the existing permit tracking number: TNR050114)

Facility Name: ENTERPRISE FARM & SALVAGE (DBA AUTO TRUCK SALVAGE)	County: SULLIVAN
Street Address or Location: 501 BUNCOME ROAD, BLOUNTVILLE, TN. 37617	Latitude: 36 31 13
	Longitude: 82 19 44
Attach a copy of U.S.G.S. topographical map, a city map, or a county map, identifying the location of this facility.	<input type="checkbox"/> Map Attached <input checked="" type="checkbox"/> ON FILE
Has a Storm Water Pollution Prevention Plan (SWPPP) been developed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Owner or Operator: (the person or legal entity which controls facility's operation; this may or may not be the same as the facility name or the official contact name) J. K. HOPKINS (OWNER)			
1	Official Contact Person Name: (Individual Responsible for a Facility) PAMELA NEWTON	Title or Position: OPERATOR	
	Mailing Address: 501 BUNCOME ROAD	City: BLOUNTVILLE	State: TN
	Phone: (423) 323-0325	Zip: 37617	

2	Local Contact Person Name: (if appropriate, write "same as #1") SAME AS NR1	Title or Position:	
	Facility Address: (this may or may not be the same as street address) " : "	Facility City:	State: TN
	Phone: () " " "	Zip:	

Write in the box (to the right) or circle the number (above) to indicate where to send correspondence and invoices:

1

Storm water runoff from facility enters following stream(s) and/or lake(s): (for each outfall, give names and stream miles) VIA DRAINAGE DITCH TO LINVILLE BRANCH. ONE & ONE HALE HILE		Number of storm water outfalls: 1
Nature of business: AUTO DISMANTLING.. USED AUTO PARTS	SIC code(s): (primary code listed as No.1, secondary, if applicable, as No.2, etc.) 1. 5015 2. 3. 4. 5. 6.	
Area of property associated with industrial activity: 10 Acres (area of facility property should not include recreation areas, landscaping, lawns, greenfields, forest, office buildings, employee parking lots, etc.)	Permit Sectors (STATE USE ONLY) M	
Activities at facility: Check all that apply. 01. <input type="checkbox"/> Manufacturing 05. <input type="checkbox"/> Vehicle Maintenance 09. <input type="checkbox"/> Wastewater treatment 13. <input type="checkbox"/> Coal Pile 02. <input type="checkbox"/> Storage/Distribution 06. <input type="checkbox"/> Hazardous waste TSD 10. <input type="checkbox"/> Land application 14. <input type="checkbox"/> Borrow Pit or Soil Harvesting 03. <input checked="" type="checkbox"/> Vehicle Storage 07. <input type="checkbox"/> Outside waste disposal 11. <input type="checkbox"/> Landfill 99. <input type="checkbox"/> Other: _____ 04. <input type="checkbox"/> Trucking Terminal 08. <input checked="" type="checkbox"/> Recycling Auto 12. <input type="checkbox"/> Mining operation		

CERTIFICATION AND SIGNATURE (Make all entries in ink, not with a pencil. This NOI must be signed by a responsible corporate officer for a corporation, a general partner for a partnership, the proprietor for a sole proprietorship, or a principal executive officer or ranking elected official for a public agency.)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

J. K. HOPKINS (OWNER)	21 JUN 2012
Printed Name	Signature
Official Title	Date

STATE USE ONLY

Received Date	Fee(s)	Reviewer	EFO	Tracking No. TNR05 0114
	T & E Aquatic Fauna	High Quality Water?	Impaired Receiving Stream	NOC Date